



**Robert E. Bush
Naval Hospital**

Did you know?...

You have the right to express your concerns about patient safety and quality of care.

There are several avenues open to you:

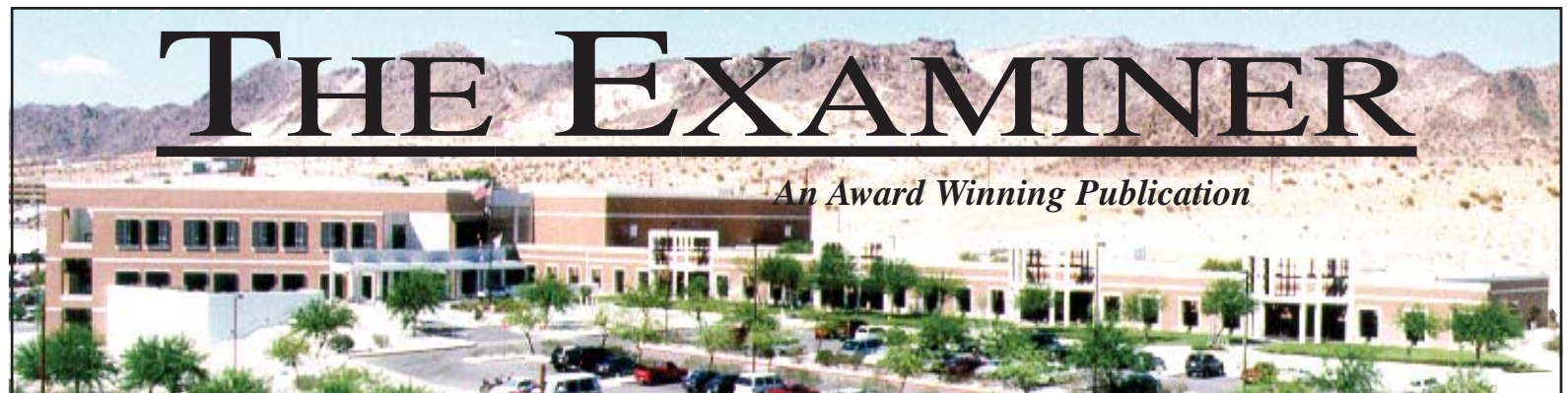
- * Through the ICE website.
- * The Hospital Customer Relations Officer at 760-830-2475, or any of the Customer Relations representatives in the Hospital clinics, or directly to the Joint Commission via: E-mail at complaint@jointcommission.org Fax: 630-792-5636

The Joint Commission
Oak Renaissance Boulevard
Oakbrook Terrace, IL 60181

To report Fraud, Waste and Abuse contact one of the below offices by calling:

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Combat Center: 760-830-7749
NavMedWest: 1-877-479-3832
Medical IG: 1-800-637-6175
DoD IG: 1-800-424-9098

Commanding Officer
Naval Hospital Public Affairs Office
Box 788250 MAGTF TC
Twentynine Palms, CA 92278-8250



<http://www.med.navy.mil/sites/nhttp/pages/default.aspx>



The Robert E. Bush Naval Hospital command photo, taken following the 2017 Winter Uniform Inspection on Nov 2.

TRICARE Enters New Era

*By Ms. Vanda Stanley, NHTP
Health Benefits Advisor*

The theme for the upcoming changes to your TRICARE benefits is "Take Command." The new year will bring a new era in TRICARE support contracts that will affect beneficiaries worldwide. The 2017 National Defense Authorization Act (NDAA) provides guidance on improvements to the delivery of healthcare and medical readiness. As a result there will be significant changes to the TRICARE programs, particularly PRIME and STANDARD. On January 1, 2018, TRICARE regions move from three to two.

HealthNet will be the contractor for the West Region and Humana will be the contractor in the East Region. Now is the time to ensure you are aware of these changes and take command of your benefits by ensuring your information is current

in DEERS. Be sure to sign up for updates at <https://www.tricare.mil/changes>. Another useful website is <https://www.dmdc.osd.mil/mil-connect> to verify your information.

This is probably one of the biggest impacts to TRICARE since the change from the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) in the 1990s.

Below are some major changes:

- Current enrollment status will be maintained going into the new year (Jan. 1, 2018).
- TRICARE Standard and Extra will be replaced by TRICARE Select.
- Auto enrollment
- Authorized some or all urgent care visits without a PCM referral

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see TRICARE*

There Are No Spare Parts or Transplants For Your Brain!

*By Lt. Cmdr. John Hoyos,
NHTP Mental Health
Department*

We usually take care to protect personal items like our cars, but things like cars can be replaced. Since you only get one brain for your entire life, it's critical you protect it. Your brain is your most complex organ, and is responsible for virtually every other part of your body--your ability to think, make decisions, feel emotions, experience pleasure, and even for consciousness itself.

A concussion is a kind of mild brain injury in the form of a blow or jolt to the head that disrupts normal brain function and can have serious impact on daily life!

Nature designed the brain perfectly, no matter what a past Drill Instructor may have told

you about yours. It is a remarkable piece of equipment and will do everything you need it to do, so long as you don't damage it. Because it is complex, it is very hard to repair. The best treatment for brain injuries and damage is prevention. If you avoid harming your brain, it will keep doing all of the incredible things it is designed to do for you. So avoiding situations where you would sustain head blows or jolts needlessly is key.

Prevention includes wearing the right gear at the right times; and too often, we take protection for granted. We take shortcuts by not wearing protective equipment; or we think that it's "cool" to go without. Most of us would never go skydiving or walk around in an active combat zone without a helmet and other

*Continued on Page 2, please
see Brain Protection*

Brain Protection, continued from Page 1.

protective equipment; yet riding a dirt bike or an ATV without a helmet can be just as dangerous.

Concussions are just as prevalent in garrison because of such injuries and a lack of adherence to prevention. This makes tak-



NIH graphic

ing precautions off-duty just as important as on-duty.

Prevention is not just a good idea; it is a way of life. Even though most people who experience a concussion will completely recover over time; the effects of repeated concussions during a lifetime add up.

Someone who has a concussion is at increased risk of having more of them in the future. If they do have another concussion, it can take longer to recover. There is even some concern that people who have a history of many concussions have a higher risk of dementia and other permanent cognitive problems later in life.

The following are signs and symptoms of a concussion: loss of consciousness, sensitivity to sunlight, dizziness, headaches, feeling more tired than usual, having problems keeping your balance, nausea (not just because you ate bad gas station sushi), problems with memory or concentration, feeling more irritated/grumpy than usual,



Call 1-800-TRICARE (874-2273); Option 1
24 hours a day, 7 days a week

feeling unusually down, depressed or edgy, or having trouble remembering words. If you have had a jolt or blow to the head and have any of the above, go see your primary care provider or Battalion Aid Station. Things could get worse and your brain can't be replaced!

Usually your symptoms will start to go away within hours of "knocking your noggin," but they will go away much faster and more completely if you are "resting your brain." This includes making sure you are getting enough sleep, drinking plenty of water, eating a healthy diet and limiting caffeine. It is really important after a concussion that you avoid drinking alcohol as it literally injures and kills brain cells. When your brain is healthy, you usually won't

notice this effect. If your brain cells are trying to heal and recover from a concussion and you drink alcohol at the same time, it's like blowing your bloody nose with automotive sandpaper. It just doesn't make sense and will take longer to heal. Signs of concussion requiring emergent care include the following: double vision or trouble focusing your eyes, difficulty staying awake during the day, confusion or loss of situational awareness, balance issues, vomiting and seizure. Any of these could be a sign of a serious injury that needs expert care right away.

The Naval Hospital Twentynine Palms Traumatic Brain Injury Clinic offers services for post-concussion care. The clinic is open to active-duty members and their family members, 16 years of age and older. We offer brain fitness services for patients interested in improving concentration, attention and focus as well as a host of neuropsychological testing services.

Call us during regular clinic hours at (760) 830-2724/2924 for any questions or concerns.

So now that you've read this entire article, your brain is even more prepared to take care of itself, and seriously--never, ever, eat gas station sushi.

TRICARE, continued from Page 1.

ral
•Annual open season enrollment period.

Being prepared is vital to ensuring you are ready for these

changes to your benefits. The Defense Health Agency (DHA), "Take Command" campaign is centered on educating beneficiaries about the T-2017 NDAA impact to TRICARE and urges all beneficiaries to take notice and recognize the need to take action: "Take command of your

health."

If you have any questions , please do not hesitate to contact me, Vanda Stanley, HBA at 830-2903. Below is a checklist with some things you can do to prepare and when to expect some of these changes:

TRICARE--What You Need to Do:

- **Do you have a user name and password for DS logon? If not, get a DS logon:** <https://www.tricare.mil>
- **Is your information--address, email, phone number--correct in DEERS? Check to be sure:** www.tricare.mil/deers
- **Have you signed up for TRICARE benefits updates? Sign up today:** www.tricare.mil/about
- **Did you have a baby or adopt a child? Did you get married or divorced? Did you move, retire, activate or have any other significant life event? Learn what you need to do at:** www.tricare.mil/lifeevents
- **Not sure what plans are offered where you live? Use the plan finder to find out what you may be eligible for:** www.tricare.mil/planfinder
- **Do you make monthly TRICARE payments electronically? Your regional contractor will contact you to update your payment information.**
- **Do you or someone in your family have special needs? Check our webpage for details about how to contact your new regional contractor:** www.tricare.mil/casemanagement

A new network directory is available at www.tricare.mil/changes. Beginning Nov. 20, your new regional call center will open. December 2017 there will be an enrollment freeze for TRICARE Prime enrollments; and Primary Care Manager (PCM) changes will be delayed during the transfer of files to new regional contractors. If you're enrolled in TRICARE Prime and are being assigned a new PCM, your regional contractor will notify you. Your new regional contractor website will go live Jan. 1, 2018. Also, Jan. 1, 2017, Explanation of Benefits (EOB) and authorization letters will go paperless and you will need a DS login. You may opt to receive a mailed EOB.

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The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

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Department in the Spotlight: MIND

By Hospitalman Stevanee Carmichael, NHTP MIND

What does resiliency look like on the NHTP Maternal Infant Nursing Department?

For eight short months I have been a member of MIND and witnessed an amazing caliber of teamwork and patient care. We offer comfort and support to patients who are welcoming a new member into their family or grieving the loss of their child.

On more stressful days, we might participate in a code purple (obstetrics emergency), triage numerous patients, and experience the full spectrum of life. No matter how calm or hectic the day may be, we find time to regroup, check in with each other and ask how they are doing. The MIND team relies on a myriad of coping mechanisms to find ways to smile and remain resilient for the next day.

As a U.S Navy Corpsman, I do not feel intimidated to ask my nurse for help, or vice versa. Nurses and Corpsmen alike con-

tribute to a respectful and fun environment which fosters collegial relationships. Nurses trust their Corpsmen are capable and competent to assist on anything from routine to complicated situations. Trust and transparency are reinforced during team huddles that occur throughout the day and after major events.

During team huddles, we focus on addressing acute situations, identifying potential problems and applauding team members' outstanding performance. The brief huddles help keep us on point and ensure we are always striving for the best. Being in the military, it is no surprise that personnel will come and go. However, that does not make it easier and actually makes it more difficult to see team members with whom we've bonded depart for new opportunities. The team relies on one another more and develops even closer ties. So, when a team member succumbs to an illness or has a family emergency, we all show our support by helping out as much

as possible, surrounding he or she with love, and strengthening the feeling of family. Sometimes it gets so hectic on the unit that we do not have much time to go to the galley or ship's store for food. To help remedy this, some shifts hold potlucks while others created a "sunshine" donation; so we at least have snack options at our fingertips if all else fails.

At other times, coworkers who are off duty will do a food run for those on duty. Family ties extend beyond work as we find time to hang out together on our off days to celebrate special events or simply catch up on life. We look for and find reasons to celebrate.

All in all, I have experienced teamwork and resiliency on this ward. We check in on each other, no matter the rank. We motivate one another to do better and to always seek improvement and excellence. If a shipmate arrives on shift with a different face than yesterday, we show we care by inquiring and showing concern.

Bottom line, we all take care of each other.

Editor's note: The NHTP Maternal Infant Nursing Department delivered 384 babies in 2016. NHTP is designated a Baby-Friendly hospital, meaning the hospital has policies and practices that meet the gold standard for mother/baby practices related to breast feeding. In November 2017, the NHTP MIND was recognized for its superior customer service with the NHTP Department in the Spotlight award.

Meet Your OPSEC Officer



Lt. Joshua Yoder

My name is Lt. Joshua Yoder and I have been here at Naval Hospital Twentynine Palms for a little over a year. I enlisted in the Navy in 2001 and served as Machinist Mate (Nuclear) from 2001-2013. During that time I did four years on an Ohio-Class submarine and three years as a Department of Energy Courier, escorting rail shipments for the Navy. In 2013 I graduated from the University of Memphis and was commissioned as a Nurse Corps Officer. My first duty station as a nurse was Naval Hospital Pensacola. I transferred to Twentynine Palms in September of last year and work in the Emergency Room as a staff nurse.

Recently I was appointed as the Operations Security Program Manager for the NHTP Command.

Operations Security has long been an integral part of mission success for all military commands. Everyone has completed

the Uncle Sam's OPSEC electronic training. It is usually the first thing we think of when we hear the term. OPSEC is about more than just a training we do annually, it is a way of thinking, a way of living.

Those who have been operational (either deployed to the desert, or aboard a ship) know the importance of keeping key information within the unit to prevent the enemy from learning about critical information. Whether it is ship's movement times, or convoy consist, or supplies required and on hand for the operation of a field hospital, each unit has information that it must safeguard to ensure mission success. This information is known as critical information and is compiled into a document known as the Critical Information List or CIL. Here at NHTP, we have a CIL. During our command OPSEC assessment last month we passed out an abridged version in all areas of the command, to be placed by the phones, as a resource for staff members. This CIL is located in its complete form on the SharePoint. I encourage all staff to familiarize yourself with the list so that you know which information to guard and what information is appropriate to discuss.

OPSEC is everyone's business; and everyone should take it seriously. Adhering to good OPSEC practices and protecting our CIL puts us one step closer to achieving our mission, while at the same time denying our adversaries the opportunity to hinder it.



Representatives from the NHTP Maternal Infant Nursing Department, with Executive Senior Nurse, Capt. Jeffrey Bledsoe.

Awardees...

The following awards were presented during the First Friday Award Ceremony, October 1, 2017, in NHTP Classrooms 4 & 5. Hospital Commanding Officer, Capt. Nadjme Hariri, was the presenting officer with Executive Officer Capt. Patrick Amersbach and Command Master Chief Jerry Ramey.



Ms. Cindy Crockett is presented with a Federal Length of Service Award in grateful recognition and appreciation for her 25 years of faithful service to the federal government.



Culinary Specialist Second Class Francis Deodatti is awarded the Navy and Marine Corps Achievement Medal.



Mr. Larry Grantham is presented with a Federal Length of Service Award in grateful recognition and appreciation for his 10 years of faithful service to the federal government.



Hospitalman Blake Klein is presented with a Patient Safety Award.



Lt. Cmdr. Marc Silfies is awarded the Navy and Marine Corps Commendation Medal.



Hospital Corpsman Second Class Balofoma Wembakpete is awarded the Navy and Marine Corps Achievement Medal.





Hospital Corpsman Third Class Evelyn Wembakpete is awarded the Navy and Marine Corps Achievement Medal.



Hospital Corpsman Second Class Vittorio Garcia reenlisted for three more years Oct. 31. Garcia, a surgery tech, has been at NHTP for the past four years. Hometown is Honolulu, Hawaii. Reenlisting officer is Lt. Cmdr. Bettina Solwazi.



Culinary Specialist Third Class Alexandria Ray Johnson reenlisted for three more years Oct. 23. Johnson's hometown is Portland, Oregon. Reenlisting Officer is Lt. Michael Kantar.



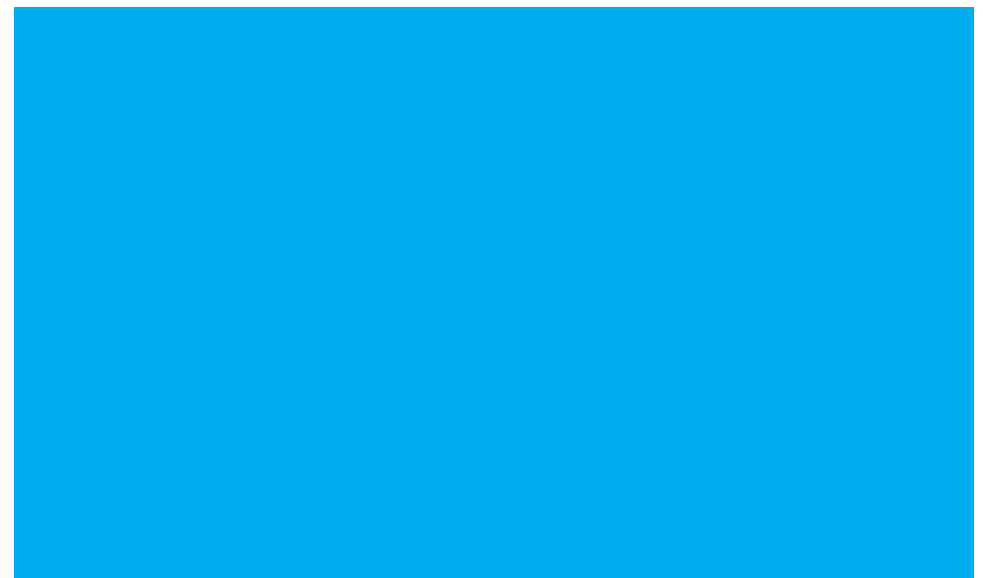
Every First-Friday Award Ceremony concludes with hearty congratulations expressed from the NHTP Command to the awardees.



Hospital Corpsman First Class Shawn Keene reenlisted for six more years Oct. 31. Keene is the Lead Petty Officer for the Directorate for Administration. He's been at NHTP for three years and in the Navy for eight years. Reenlisting Officer is Capt. Jeffrey Bledsoe.



Senior Chief Hospital Corpsman Dale Wolkenhauer reenlisted for two more years Oct. 31. Wolkenhauer is Senior Enlisted Leader for the Directorate for Medical Service and the Directorate for Public Health. Reenlisting Officer was Capt. Roger Bunch.



Introducing New Staff -- Welcome Aboard!



Lt. Michael Greenberg

Lt. Michael Greenberg arrived from a one-year psychology internship at Naval Medical Center San Diego. Previous to that, he earned his doctorate in clinical psychology at the Wright Institute in Berkeley, California, and earned his undergraduate degree at UC Santa Cruz. Hometown is San Diego. He is realizing a long-standing ambition to treat people, specifically U.S. Marines, with PTSD. "That's my driving interest in becoming a psychologist in the Navy," he said. His favored treatment modalities include prolonged exposure, "which helps people go through the trauma," and cognitive-processing therapy, "helping people rework their thoughts and memories." Greenberg had never visited the Mojave Desert before and is impressed with its "subtle beauty." "I think it's going to be great here," he said. He found a house in Yucca Valley and plans to begin rock climbing. Other hobbies include gaming, board games and shooting.



Lt. j.g. James Maxfield

Lt. j.g. James Maxfield arrived from a physical therapy internship at NMC San Diego. "I had a great time there," he said. "I was able to go from the main hospital to the branch clinics and spend time with everything from radiology to orthopedics." Previous to that, he completed his doctorate degree in physical therapy at Baylor University in Waco, Texas. Maxfield said a colleague who preceded him said NHTP "is an excellent assignment where a clinician can fine tune his skills." Maxfield spent four years as an enlisted Sailor prior to attending Baylor and left the Navy after that first stint as a Master-at-Arms Petty Officer Second Class. He grew up alternating between Vermont and Puerto Rico. At NHTP, he is a staff physical therapist and expects to mainly work at the AMCC. He's here with his wife, a teacher who also salsa dances. They are in temporary housing, awaiting base housing. They enjoy scuba diving, exercise in general, and mountain biking.



Ms. Jennifer (Jen) Lamberth

Ms. Jen Lamberth is NHTP's new Information Receptionist, greeting and providing direction to visitors at the Quarterdeck. Previously, she worked at Navy Gateway Inn and Suites at Walter Reed National Military Medical Center where she helped assist wounded warriors. Lamberth has a Bachelor's degree in industrial-organizational psychology from San Diego State University. "It's basically getting and keeping employees happy," she said. Lamberth refers to herself as a "military child" and said she's lived in many places, but considers San Diego home. She said she likes the change of seasons that comes with living in the high desert. Career-wise, Lamberth wants to eventually assist type-1 diabetes patients and intends to earn the credential: board-certified advanced diabetes manager. Lamberth says she feels great about being "the forward facing person for the command." She enjoys driving exotic fast cars and attending festivals.



HA Isis Aguirre

Hospitalman Apprentice Isis Aguirre is originally from Miami, Florida, but lived here in the high desert with her 7th Regiment U.S. Marine Corps husband for the past two years. She took a break to join the Navy, attend boot camp and Hospital Corpsman "A" School. Aguirre had considered joining the Marines, but had a long-standing desire to be in the medical field. "Corps school was a lot of fun," she said. "The instructors were really great. So far, everything in the Navy is really nice, and I like it," she said. Aguirre plans to finish the degree she was working on at Copper Mountain College prior to joining the Navy and eventually earn a Master's degree with the goal of becoming a physician assistant. She's worked in the past as a home-healthcare provider and also worked at the base Child Development Center. She and her husband enjoy exploring Joshua Tree National Park as well as other outdoor activities associated with living in Southern California.



CSC Jason Powell

Culinary Specialist Chief Jason Powell arrived from the USS Nimitz (CVN 68) where he was the Senior Enlisted Leader for the Maintenance and Material Management Department. He's been in the Navy 19 years. He's originally from Conroe, Texas, and joined the Navy "to support and defend our great country." Looking back, he said it was his first assignment, on the USS Kamehameha (SSBN-642), that he enjoyed the most. "It was my first submarine; it's where I made the closest bonds with the other submariners; and it's where I got my dolphins," he said. Powell likes being a culinary specialist. "It's all about morale," he said. "You set the pace and the tone for the day and you can either make it or break it," he said. Powell believes in positive change and hopes the breadth of his experience will benefit his Sailors at NHTP. He owns a home in Washington State, where his wife and two young children reside. He's recently taken up metal detecting as a pastime.



National Breast Cancer Awareness Month was observed at NHTP October 20 with cake and remarks from NHTP Commanding Officer, Capt. Nadjmeh Hariri, and Nurse Midwife, Lt. Cmdr. Karen Sanchez. The theme is "Every ribbon tells a story," which was reenforce by the attendees at the observance. Everyone raising their hand in this picture has been affected by breast cancer.



Hospital Corpsman Second Class Regina Davis reenlisted for five more years Oct. 27. Davis is the Lead Petty Officer for the OBGYN Clinic. She's been in the Navy for six years, three at NHTP. Hometown is Corona, California. Reenlisting Officer is Lt. Cmdr. Karen Sanchez. (Photo by HM2 Michelle Bowles).



MAGTFTC/MCAGCC Commanding General, Maj. Gen. William F. Mullen III, poses with Emergency Room staff Oct. 6. After reading the many positive comments regarding the NHTP ER in the Facebook group, Make the Stumps Better, Maj. Gen. Mullen stopped by to personally congratulate staff.



The October 18 MCCS Community Health Fair, held in the MCAGCC East Gym, included Breast Health Coordinator, Ms. Shannel Matthews (foreground) and at the next table, Ms. Tanya Stuckey, Public Health Specialist and Martha Hunt, Smoking Cessation Specialist.



Left: Ms. Ericka Andaya, Hospital Corpsman Second Class Nelson DeGuzman and Capt. Roger Bunch open the Drug Take-Back Box October 31. The Medsafe Box, located in the NHTP Pharmacy, is open during normal business hours and is for the disposal of legal drugs only (both over-the-counter and prescription).

Not allowed: Illegal substances, liquids greater than four ounces, needles and sharps, aerosol cans, batteries, chemicals, mercury thermometers.



First Receiver Operations Training (FROT) was conducted on Oct. 19. The NHTP Team was required to raise the tent with the hot-water pump connected in 15 minutes or less. Our team accomplished this in 9:28 minutes. Their second challenge was to complete the entire timed exercise in under 21 minutes. The NHTP team accomplished this in 9:28 minutes.

